

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

10-618-415

FILING DATE

07-11-03

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2		2		2		
3		1		1		
4		1		1		
5	1		1			
6		1		1		
7		2		2		
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TOTAL IND.	2		2			
TOTAL DEP.	7		10			
TOTAL CLAIMS	9		12			

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